AMENDMENTS TO LB799

(Amendments to Standing Committee amendments, AM1730)

Introduced by Coash

1	1. Insert the following new section:
2	Sec. 2. (1) For purposes of this section:
3	(a) Applied behavior analysis means the design,
4	implementation, and evaluation of environmental modifications,
5	using behavioral stimuli and consequences, to produce socially
6	significant improvement in human behavior, including the use of
7	direct observation, measurement, and functional analysis of the
8	relationship between environment and behavior;
9	(b) Autism spectrum disorder means any of the pervasive
10	developmental disorders or autism spectrum disorder as defined by
11	the Diagnostic and Statistical Manual of Mental Disorders, as the
12	most recent edition of such manual existed on the effective date of
13	this act;
14	(c) Behavioral health treatment means counseling and
15	treatment programs, including applied behavior analysis, that are:
16	(i) Necessary to develop, maintain, or restore, to the maximum
17	extent practicable, the functioning of an individual; and (ii)
18	provided or supervised, either in person or by telehealth, by a
19	behavior analyst certified by a national certifying organization or
20	a licensed psychologist if the services performed are within the
21	boundaries of the psychologist's competency;
22	(d) Diagnosis means a medically necessary assessment,

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1 evaluation, or test to diagnose if an individual has an autism

- 2 spectrum disorder;
- 3 (e) Pharmacy care means a medication that is prescribed
- 4 by a licensed physician and any health-related service deemed
- 5 medically necessary to determine the need or effectiveness of the
- 6 medication;
- 7 (f) Psychiatric care means a direct or consultative
- 8 service provided by a psychiatrist licensed in the state in which
- 9 he or she practices;
- 10 (g) Psychological care means a direct or consultative
- 11 service provided by a psychologist licensed in the state in which
- 12 he or she practices;
- 13 (h) Therapeutic care means a service provided by a
- 14 licensed speech-language pathologist, occupational therapist, or
- 15 physical therapist; and
- 16 <u>(i) Treatment means evidence-based care, including</u>
- 17 related equipment, that is prescribed or ordered for an individual
- 18 diagnosed with an autism spectrum disorder by a licensed physician
- 19 or a licensed psychologist, including:
- 20 (i) Behavioral health treatment;
- 21 (ii) Pharmacy care;
- 22 <u>(iii) Psychiatric care;</u>
- 23 (iv) Psychological care; and
- 24 (v) Therapeutic care.
- 25 (2) Notwithstanding section 44-3,131, (a) any individual
- 26 or group sickness and accident insurance policy or subscriber
- 27 contract delivered, issued for delivery, or renewed in this state

and any hospital, medical, or surgical expense-incurred policy, 1 2 except for policies that provide coverage for a specified disease 3 or other limited-benefit coverage, and (b) any self-funded employee 4 benefit plan to the extent not preempted by federal law, including 5 any such plan provided for employees of the State of Nebraska, 6 shall provide coverage for the screening, diagnosis, and treatment 7 of an autism spectrum disorder in an individual under twenty-one 8 years of age. To the extent that the screening, diagnosis, and 9 treatment of autism spectrum disorder are not already covered by 10 such policy or contract, coverage under this section shall be 11 included in such policies or contracts that are delivered, issued 12 for delivery, amended, or renewed in this state or outside this 13 state if the policy or contract insures a resident of Nebraska on 14 or after January 1, 2015. No insurer shall terminate coverage or 15 refuse to deliver, issue for delivery, amend, or renew coverage of 16 the insured as a result of an autism spectrum disorder diagnosis or 17 treatment. Nothing in this subsection applies to non-grandfathered 18 plans in the individual and small group markets that are required 19 to include essential health benefits under the federal Patient Protection and Affordable Care Act or to medicare supplement, 20 21 accident-only, specified disease, hospital indemnity, disability 22 income, long-term care, or other limited benefit hospital insurance 23 policies. 24 (3) Except as provided in subsection (4) of this section, 25 coverage for an autism spectrum disorder shall not be subject 26 to any limits on the number of visits an individual may make 27 for treatment of an autism spectrum disorder, nor shall such AM2538 AM2538 LB799 LB799 MHF-03/20/2014 MHF-03/20/2014

1 coverage be subject to dollar limits, deductibles, copayments, or

- 2 coinsurance provisions that are less favorable to an insured than
- 3 the equivalent provisions that apply to a general physical illness
- 4 under the policy.
- 5 (4) Coverage for behavioral health treatment, including
- 6 applied behavior analysis, shall be subject to a maximum benefit
- 7 of twenty-five hours per week until the insured reaches twenty-one
- 8 years of age. Payments made by an insurer on behalf of a covered
- 9 individual for treatment other than behavioral health treatment,
- 10 including applied behavior analysis, shall not be applied to any
- 11 maximum benefit established under this section.
- 12 (5) Except in the case of inpatient service, if an
- 13 individual is receiving treatment for an autism spectrum disorder,
- 14 an insurer shall have the right to request a review of that
- 15 treatment not more than once every six months unless the insurer
- 16 and the individual's licensed physician or licensed psychologist
- 17 execute an agreement that a more frequent review is necessary.
- 18 Any such agreement regarding the right to review a treatment plan
- 19 more frequently shall apply only to a particular individual being
- 20 treated for an autism spectrum disorder and shall not apply to
- 21 all individuals being treated for autism spectrum disorder by a
- 22 licensed physician or licensed psychologist. The cost of obtaining
- 23 a review under this subsection shall be borne by the insurer.
- 24 (6) This section shall not be construed as limiting
- 25 any benefit that is otherwise available to an individual under
- 26 a hospital, surgical, or medical expense-incurred policy or
- 27 health maintenance organization contract. This section shall not

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- 1 be construed as affecting any obligation to provide services
- 2 to an individual under an individualized family service plan,
- 3 individualized education program, or individualized service plan.
- 4 2. Renumber the remaining section accordingly.